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25962 7590 07/23/2010					Cartificate of Mailing or Transmission					
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			I						(Depositor's name)	
									(Signature)	
				<u>L</u> _					(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORN		OOCKET NO. CON		TRMATION NO.	
10/565,928 01/20/2006		Kevin R. Boyle		EPC-014			9395			
TITLE OF INVENTION:	TUNING IMPROVEMEN	TS IN "INVERTED-	L" PLANAR ANTEN	INAS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	FEE DUE PREV. PAID		FEE TOTAL FEE(S) DUE			DATE DUE	
nonprovisional	NO	\$1510	. \$0		\$1510		\$1510		10/25/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS	3						
DUONG, DIEU HIEN		2821	343-745000							
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Slater & Matsil, L.L.P.  2  3  3							
DI EASE NOTE: Unle	ND RESIDENCE DATA T ess an assignee is identifie i in 37 CFR 3.11. Complet SNEE	d below no assignee	data will appear on t	the pa ig an a	atent. If an assigned assignment.  and STATE OR C			documen	at has been filed for	
Please check the appropriate assignee category or categories (will not be printed on the patent):										
4a. The following fee(s) a  Issue Fee Publication Fee (N Advance Order - #	<ul> <li>Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).</li> </ul>									
a. Applicant claims	tus (from status indicated as SMALL ENTITY status.	See 37 CFR 1.27.	b. Applicant is n							
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Authorized Signature	Date10/18/2010									
Typed or printed name			Registration N	10.	5,272	-				
an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 CF tiality is governed by 35 Ud application form to the Usions for reducing this burd Yirginia 22313-1450. DO 1313-1450. duction Act of 1995, no pe	JSPTO. Time will valen, should be sent to NOT SEND FEES OF	ry depending upon the the Chief Information R COMPLETED FOR	indi Offic MS T	vidual case. Any co er, U.S. Patent and O THIS ADDRESS	omments of Trademar S. SEND	on the amount of the Office, U.S. De TO: Commissione	time you partmen or for Pat	require to complete t of Commerce, P.O ents, P.O. Box 1450	